



ocket No: 24914-134

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 8, 2004.

Stephanie Berlepsch
Stephanie Berlepsch

RECEIVED

PATENT

OCT 20 2004

Technology Center 2100

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: Stephen J. Yutkowitz :
Serial No.: 10/017,021 : Group Art Unit: 2121
Filed: December 14, 2001 : Examiner: Liu, Joshua C.
For: **Method and Apparatus For Tuning Compensation Parameters**

AMENDMENT

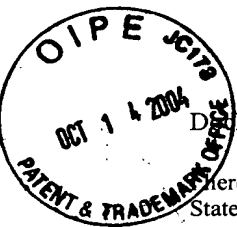
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Official Action dated July 19, 2004, please amend the present application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.



Docket No.: 24914-134

PATENT

CERTIFICATE OF MAILING

hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 8, 2004.

Stephanie Berlepsch
Stephanie Berlepsch

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: Stephen J. Yutkowitz :
Serial No.: 10/017,021 : Group Art Unit: 2121
Filed: December 14, 2001 : Examiner: Liu, Joshua C.
For: **Method and Apparatus For Tuning Compensation Parameters**

RECEIVED

OCT 20 2004

Technology Center 2100

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

- [] additional fee is required.
[X] also attached: Return Postcard

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	18	20	0	x \$18=	\$00.00
Independent Claims	5	5	0	x \$88 =	\$0.00
TOTAL FEE DUE					\$00.00

- [] A check in the amount of \$ is enclosed.
[] Please charge the amount of \$0.00 to our Visa credit card account. Form PTO-2038 is attached.
[x] The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment, to Deposit Account No. 04-1133, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

By: Geoffrey L. Oberhaus
Geoffrey L. Oberhaus
Registration No. 42,955
DINSMORE & SHOHL, LLP
1900 Chemed Center
255 East Fifth Street
Cincinnati, Ohio 45202
(513) 977-8623
Date: **October 8, 2004**